



Area 34 Information Update 2011-2012

Please complete this form in its entirety.

Name:	
Address:	
City:	Zip Code:
Home Phone:	
Alternate Phone	
Email address:	
Name on email account:	
Date of Birth:	Current Age:
Check One: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Teacher or Caseworker:	
Parent/Guardian:	

What is the preferred way of contacting your athlete/family about general Special Olympics Information? (newsletters, registration, fundraisers, etc.)

email US mail phone

How would you like to be notified of practice/game information?

email US mail phone

**Please return your completed form to your athlete's Coach or Representative.
Or return to Kerry Simmons 1101 S. Raisinville Rd, Monroe, MI 48161.**